PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number				
U.S. NATIONAL STAGE FEES			(00)	,		500011111 2)	1	RATE	FEE		RATE	FEE	
BASIC FEE							1	BASIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE							1	EXAM. FEE			EXAM. FEE	200	ĺ
SEARCH FEE							1	SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =		1	X \$ 250 =		ĺ
TOTAL CHARGEABLE CLAIMS			20 mi	nus 20 =	*		X \$ 25 =		OR	X \$ 50 =		l	
INDEPENDENT CLAIMS			4 minus 3 =		• /		1.	X \$ 100 =		OR	X \$ 200 =	200	l
MULTIPLE DEPENDENT CLAIM PR			SENT				1	+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1100	İ
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL E	OTHER THAN NTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	<u>.</u> ,	Minus	See /				X \$ 25		OR	X \$ 50 =		
	Independent	Dong	Minus	***		<u>"</u>		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		<u>R</u>	+ \$ 360 =	//	٦
								TOTAL ADDIT.		OR	TOTAL ADDIT.		
		(Column 1)		(Colu	mn 2)	(Column 3)					•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**				X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		ļ
· · · · · · · · · · · · · · · · · · ·								TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
FORM	PTO-875 (Rev. 02	(2005)						Palent and Ten	lamark Office	-11.5	DEPARTMENT OF	COMMEDCE	